### FORM D

A PERENTED

#### OMB APPROVAL

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES 2003 PÜRSUANT TO REGULATION D, SECTION 4(6), AND/OR

LIMITED OFFERING EXEMPTION

OMB Number:
Expires: Decembe
Estimated average burden
hours per form 3235-0076 December 31, 1993 16.00

1223334

SEC USE ONLY

Prefix

Serial

Date Received



	03030301
Filing Under (Check boxes(es) that apply): []Rule 504 []R	Rule 505 [X] Rule 506 [ ] Section 4(6) [ ] ULOE
Name of offering ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Filing Under (Check boxes(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) []To the filing [X] Amendment [X] Final  A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the iss name of Issuer: ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Address of Executive Offices (Number and Street, City, State, Zip Code) 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Address of Principal Business Operations (Number and Street, City, Sate, Zip Code) 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Brief Description of Business  DRILLING OF TWO (2) OIL AND/OR GAS WELL  Type of Business Organization  GENERAL PARTNERSHIP	
A. BASIC IDENTIFICATION	ON DATA
Name of Issuer: ([] check if this is an amendment and na	me has changed, and indicate change.)
Address of Executive Offices (Number and Street, City, St 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141	ate, Zip Code) Telephone Number (Including Area Code) 877-733-4621
Name of offering ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Filing Under (Check boxes(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) [ Type of Filing: [] New Filing [X] Amendment [X] Final  A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the is Name of Issuer: ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Address of Executive Offices (Number and Street, City, State, Zip Code)  157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Address of Principal Business Operations (Number and Street, City, Sate, Zip Code)  157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Brief Description of Business  DRILLING OF TWO (2) OIL AND/OR GAS WELL  Type of Business Organization [] limited partnership, already formed [X] Other (please specify [X] business trust [] limited partnership to be formed  Month Year	Telephone Number (Including Area Code) 877-733-4621
Priof Doggrintion of Duginosa	
Name of offering ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Filing Under (Check boxes(es) that apply): []Rule 504 []Rule 505 [X] Rule 506 []Section 4(6) [ Type of Filing: [] New Filing [X] Amendment [X] Final  A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the i Name of Issuer: ([] check if this is an amendment and name has changed, and indicate change.)  SOUTHEASTERN ENERGY-WHITE CREEK PROSPECT, A KENTUCKY GENERAL PARTNERSHIP  Address of Executive Offices (Number and Street, City, State, Zip Code)  157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Address of Principal Business Operations (Number and Street, City, Sate, Zip Code)  157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141  Brief Description of Business  DRILLING OF TWO (2) OIL AND/OR GAS WELL  Type of Business Organization [] limited partnership, already formed [X] Other (please specify [] business trust [] limited partnership to be formed  Month Year	
[ ] business trust [] limited partnership to be forme	ed
Actual or Estimated Date of Incorporation or Organization:	

0 3

[X] Actual [] Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

#### GENERAL INSTRUCTIONS

deral:

O Must File: All issuers making an offering of secfurities in reliance eon an exemption under Regulation D or Section 4(6),
CFR 230.501 et seq. or 15 U.S.C. 77d(6). to File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed d with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by te SEC at the addresses no below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered ertified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifty Street, NW, Washington, D.C. 20549 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuers and offering, any changes thereto, the information requested in Parts and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

lance on the Uniform Limited Offering Exemption (ULOE) for sales of seave adopted this form. Issuers relying on ULOE must file a separatiere sales are to be or have been made in a state requires the paying a fee in the property amount shall accompany this form. This notice it the law. The Appendix to the notice constitutes a part of this n

A. Enter the information requested for the following:	BASIC	IDENTIFICATION	DATA
<pre>* Each promoter of the issuer, if the issuer has bee * Each beneficial owner having the power to vote or d</pre>	lispose, or direc	h the past five years; t the vote or disposit	ion of, 10%
or more of a class of equity securities of the iss * Each executive officer and director of corporate	suer; : issuers and of	corporate general ar	nd managing
partners of partnership issuers; and * Each general and managing partner of partnership i			
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner	r [ ]Executive	Officer [ ]Director	[X]General and/or Managing Partners
Full Name (Last name first, if individual) Southeastern Energy, Inc., program manager			
Business or Residence Address (Number and Street, City, S 157 REYNOLDS ROAD, GLASGOW, KENTUCKY 42141	tate, Zip Code)		
Check Box(es) that Apply: [X]Promoter []Beneficial Owner	r [X]Executive	Officer [X]Director	[ ]General and/or Managing Partners
Full Name (Last name first, if individual) Murrell, Alan G			
Business or Residence Address (Number and Street, City, S Shirley Office Building, P. O. Box 591, Edmonton, Kentuck			
Check Box(es) that Apply: [X] Promoter [] Beneficial Own	er [X] Executiv	e Officer [X] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual) Smith, Doug			
Business or Residence Address (Number and Street, City, S Shirley Office Building, P. O. Box 591, Edmonton, Kentuck			
Check Box(es) that Apply: [X] Promoter [] Beneficial Own	er [X] Executiv	e Officer [X] Director	<pre>{] General and/or Managing Partners</pre>
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, S	tate, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	r [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, S	State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	er [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, S	tate, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial Owner	er [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, S	state, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial Owns	er [] Executive	Officer [] Director	[] General and/or Managing Partners
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, S		0551 13 71	(1) Gamerica 2
Check Box(es) that Apply: [] Promoter [] Beneficial Owner Full Name (Last name first, if individual)	er [] Executive	Ufficer [] Director	[] General and/or Managing Partners
Business or Residence Address (Number and Street, City, S	State, Zip Code)		

В.	INFORM	ATION ABOUT	OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? [X]Yes []No

Answer also in Appendix, Column 2, if filing under ULOE.

- 2. What is the minimum investment that will be accepted from an individual? . . . . . 1/4 unit \$8,250
- 3. Does the offering permit joint ownership of a single unit? . . . . . . . . . . . . . . . . [X] Yes [ ] No
- 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchaser in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	es" or	check indi	ividual	States) .						[]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]		[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[VW]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	tes" or c	heck ind:	ividual S	States) .						[]	All States
(AL) [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	"All Stat	es" or c	heck indi	ividual	States) .						n	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

"0"	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND ter the aggregate offering price of securities included in this offering and if answer is "none" or "zero". If the transaction is an exchange offering, umns below the amounts of the securities offered for exchange and already	the total amount check this box []	already sold. Enter and indicate in the
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		\$
	[] Common [] Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	1,980,000	\$ 1,980,000
	Total		
2.	Enter the number of accredited and non-accredited investors who have pure and the aggregate dollar amounts of their purchases. For offerings under persons who have purchased securities and the aggregate dollar amount of tenter "0" if answer is "none" or "zero".	Rule 504, indica	ite the number of
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	53	\$1,504,500
	Non-accredited investors	34	\$475,500
	Total (for filings under Rule 504 only		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information sold by the issuer, to date, in offerings of the types indicated, in the first sale of securities in this offering. Classify securities by type is	twelve (12) mon	ths prior to the
	Type of offering	Type of Security	cold
	Rule 505		Ċ
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and this offering. exclude amounts relating solely to organization expenses of be given as subject to future contingencies. If the amount of an expense estimate and check the box to the left of the estimate.	f the issuer. Th	e information mav
	Transfer Agent's Fees		[] \$
	Printing and Engraving Costs		[] \$
	Legal Fees		\$_5,000
	Accounting Fees		[] \$ <u>500</u>
	Engineering Fees		[] \$ <u>500</u>
	Sales Commissions (specify finders' fees separately)		. ] \$ <u> </u>
	Other Expenses (identify) printing and miscellaneous		[] \$ 4,000
	Total		
	4 of 8		SEC 1972 (5/91)

1.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS  b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expense furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to part C - Question 4.b above.
	Payments to Officers Directors & Payments to Affiliates Others
	Salaries and Fees
	Purchase of Real Estate
	Purchase, rental or leasing & installation of machinery & equipment [ ] \$ [ ] \$
	Construction or leasing of plat buildings and facilities [ ] \$ [ ] \$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) [] \$ [] \$
	Repayment of Indebtedness
	Working Capital
	Other (Specify) Contract Drilling and Completion [] \$ 1,970,000 [] \$
	[] \$ [] \$
	Column Totals
	Total Payments Listed (column totals added)
	D. FEDERAL SIGNATURE
fil Sec	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is led Under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. curities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to non-accredited investor pursuant to paragraph 9b)(2) of Rule 202.
Is	ssuer (Print or Type) Signature A Date
S	OUTHEASTERN ENERGY-WHITE CREEK PROSPECT Della Bullay 8/11/03
	ame of Signer (Print or Type)  Title of Signer (Print or Type)  ASSISTANT SECRETARY

ATTENTION

International misstatement or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATU	TP E

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is flied, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)

Signature

SOUTHEASTERN ENERGY-WHITE CREEK
PROSPECT

Name of Signer (Print or Type)

DEBBIE BILBREY

Signature

#### Instructions:

Print the names and title of the signing representative under his signature for the state portion of this form. Once copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signature.

## APPENDIX

				AFF	ENDIX					
1		2	3			5				
	sell t accre inve: (Par	nd to co non- dited stors t B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type of inv	Type of investor and amount purchased in state (Part C-Item 2)					
State	Yes	No	GENERAL PARTNERSHIP 1,980,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL	w		**	-1-	\$66,000	-0-				
AK										
AZ	х		"			-1-	8,250			
AR	х		"	2	\$41,250					
CA	"		"	-8-	\$214,500	-3-	49,500			
CO	"		"	-2-	\$49,500	-2-	41,250			
CT										
DE										
DC										
FL	х		"	-10-	\$115,500	-4-	57,750			
GA	Х		"	1	\$33,000	-1-	16,500			
HI										
ID		_								
IL	х		\\	-2-	\$24,750	-1-	\$8,250			
IN	Х		"	-1-	\$33,000					
IA	Х		N.			-1-	8,250			
KS	х		W			-1-	8,250			
KY										
LA										
ME										
MD					422.222				ļ	
MA	Х		"	-0-	\$33,000	-2-	24,750			
MI	х				400.000	-1-	33,000			
MN	Х		"	1	\$33,000	-1-	8,250			
MS	х		n	-1-	\$33,000	-0-				
MO										

# APPENDIX

1	1	2	3		4				5
	Inter sell t accre inves	nd to o non- dited stors	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of inv	in state	Disqualification under state ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	GENERAL PARTNERSHIP 1,980,000	Number of Accredited Investors	Amount	Number of Non- Accredi ted Investo rs	Amount	Yes	No
MT									
NE	х		''	-1-	8,250	1	33,000		
NV	х		"	-1-	16,500				,
NH									
NJ	х		"	-1-	396,000				
NM	х		W.			2	24,750		
NY	х		"	2	24,750	1	8,250		
NC	х		"			1	8,250		
ND									
OH	х		w	-3-	\$90,750	-0-			
ОК	Х		n.		_	-1-	8,250		
OR									
PA									
RI									
SC	ļ								
SD									
TN	x		n .	-2-	\$49,500	-1-	16,500		
TX	x		W	-3-	\$33,000	-4-	99,000		
UT									
VT		-							
VA	Х		"	1	16,500				
WA	Х		"	2	41,250				
WV									
WI	х		"	-3-	\$66,000	-1-	8,250		
WY	Х		"	-1-	\$16,500	1			
PR									